# APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

| FOR AGENCY USE | 1. Agency Address | FOR RECORDS MANAGEMENT USE |
|---|---|---|
| Application Date | Commissioner of Insurance<br>Insurance Department – Regulatory Laws<br>604 West Tower, Floyd Building<br>200 Piedmont Avenue, SE<br>Atlanta, Georgia 30334 | Application Number **89-029** |
| Application Number | | Date Received **MAY - 9 1989** \| Date Completed **JUN 12 1989** |

**2. Person to Contact**

Mary Jane Johnston

Working Title: Administrative Clerk

Telephone Number: 656–2076

**3. Action Requested**

a. ☒ Establish Retention Schedule; record will continue to accumulate.

b. ☐ Dispose of present accumulation; no further accumulation anticipated.

c. ☐ Amend Application No. _____ Check One: ☐ Change; ☐ Supercede; ☐ Void

**4. Dates of Series**

Earliest: March –1989    Latest: Present

**5. Records Series Title** *(followed by title used in office; if different)*

Quarterly Financial Statements (Life, Fraternal, Non-Profit, HMO Co's)

**6. Division and Office Function**    What is the function of the Division and the Office in which this record series is created?

The Commissioner of Insurance is responsible for regulating insurance companies and for administering insurance–related laws; supervising and licensing loan companies making loans of $3,000.00 or less; and enforcing the State's Fire Safety Laws and Mobile home sales regulations.

The Insurance Division supervises insurance companies and agents, ~~collects premium taxes~~, examines policy forms and policy rates, and administers insurance related laws. The Division also licenses agents and companies and investigates consumer complaints.

**7. Record Series Description**

This file contains the following documents *(include form numbers and titles, if any)*:
Attach samples of the file.

Documents relating to:

Insurers Financial Statements – a quarterly statement is received each quarter and one quarter supersedes the present quarter.

Included are:

Quarterly Figures

File is arranged:    Alphabetically

**8. Monthly Reference Rate**    How often are records referred to which are:

One to six months old __1__; Seven to twelve months old __1__; Thirteen to twenty-four months old _____; twenty-five months and older _____?

**9. Annual Rate of Accumulation of Records**

Letter-size drawers _____; Legal-size drawers _____; Shelves __3__; Other *(specify)* _____

AR–50–71; Rev. 76                    (Over)

| | | | |
|---|---|---|---|
| X | | a. Is this the official copy of the series? If not, where is it? | |
| | X | b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation. | |
| | X | c. Is this a vital record? | |
| | X | d. Does this series have historical or long term research value? | |
| | X | e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately? | |
| | X | f. Is the information contained in this series ever published? If yes, attach copy. | |
| | X | g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. | |
| | X | h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? | |
| | X | i. Is this series *(or a major portion of it)* regularly microfilmed? | |
| | X | j. Does the record series result in a computer printout? | |

## 11. Retention Requirements   The following requires the series to be kept:

a. State Law _____ years.     d. Audit period _____ years.

b. Statute of limitation _____ years.     e. Administrative need ___ONE___ years.

c. Federal law _____ years.     f. Federal retention instructions _____ years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

Referral Purposes

## 12. Approved Disposition Instructions   This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

☒ Hold in the current files area _____ month(s) ___1___ year(s); then

☐ Transfer to local holding area, hold _____ year(s); then

☐ Transfer to State Records Center; hold _____ year(s); then

☒ Destroy. **

☐ Transfer to State Archives for permanent retention.

☐ Other *(Specify)*

** Destroy all quarterly statements when the annual statement for that year is received.

These instructions apply to all prior and future accumulations of the series.

| Agency Head/Designee *(Signature)* | Date | Records Management Officer *(Signature)* | Date |
|---|---|---|---|
| *Ralph Terry* | 5-1-89 | *Fred Anderson* | 5-8-89 |

89-0290

| Recommendations in paragraph 12 are approved. *(If disapproved, attach letter of explanation.)* 890509-02 | State Records Committee *(Signature)* | Date |
|---|---|---|
| | State Auditor/Designee | *signature* | 6/14/89 |
| | Secretary of State/Designee | *Edward Miller* | 6/7/89 |
| | ~~Governor~~ Attorney General/Designee | *W.H. Roper* | 6/7/89 |

AR—50—71; Rev. 76                                (Reverse Side)